National Center for ETHICS in Health Care

IntegratedEthics
Facility Workbook

Guide to the
IntegratedEthics Facility Workbook:
Understanding Your Results

IntegratedEthics
Improving Ethics Quality in Health Care

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Guide to the IntegratedEthics Facility Workbook: Understanding Your Results

The questions and responses in the workbook provide a framework for assessing the degree to which your facility's approaches to improving ethics quality are *comprehensive, systematic, broadly deployed, and well integrated.* As you review your responses, you may wish to identify specific ethics quality gaps, that is, the degree to which your facility's approaches may be insufficiently *comprehensive, systematic, broadly deployed,* and *well integrated.* The responses have been constructed in such a way as to suggest possible next steps for improvement.

Types of Questions

"Best Response" Questions: For questions that ask you to "mark only one" response, the "best response" is the most *comprehensive, systematic, broadly deployed,* and/or *well integrated* approach. In the example below, the shaded response is "best" because it is more systematic than the other options.

"Best Response" Example:

1.8   Which of the following best describes your facility's approach to ensuring that individuals performing ethics activities have access to needed resources, such as library materials, clerical services, and training? (Mark only one.)

☐ Our facility does not have an approach for ensuring that individuals performing ethics activities have needed resources.

☐ Our facility considers requests to provide resources for the ethics program on a case-by-case basis.

☐ Our facility provides resources for the ethics program through a specific budget allocation.

☐ Other (specify):

"More Is Better" Questions: For many questions that ask you to "mark all that apply," the more responses you select, the "better" your approach. For example, the "best" response to question 2.7 would be all of the response options. In this case, multiple responses suggest an approach that is more comprehensive and systematic.

"More Is Better" Example:

2.7   Which of the following describes how ethics consultants in your facility learn to perform ethics consultation? (Mark all that apply.)

☐ Ethics consultants learn through self-study.

☐ Ethics consultants learn by observing more experienced members.

☐ Ethics consultants learn by receiving specific performance feedback from more experienced members.

☐ Ethics consultants learn by receiving feedback from requestors and/or patients, families or surrogates.

☐ Ethics consultants learn by completing a specific curriculum.

☐ Ethics consultants learn by following a specific plan for continuous professional development.

☐ Other (specify):

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"Hybrid" Questions: Some questions are a combination of "Best Response" and "More Is Better." These questions may ask you to "mark all that apply," but have some responses that are mutually exclusive. Other hybrid questions have several preferred or "best" responses. For example, in question 4.11, the responses shaded below are "best" because they represent a more comprehensive, systematic, broadly deployed, and/or well integrated approach than the other responses.

"Hybrid" Question Example:

4.11 Which of the following are included in your facility's approach to educating leaders about ethical leadership? (Mark all that apply.)

☐ This facility does not have a specific approach to educating leaders about ethical leadership.

☐ Some leaders are offered education about ethical leadership.

☐ All leaders are offered education about ethical leadership.

☐ Some leaders are required to receive education about ethical leadership.

☐ All leaders are required to receive education about ethical leadership.

☐ Some leaders are encouraged to use self-assessment as a means to identify areas of ethical leadership for further development.

☐ All leaders are encouraged to use self-assessment as a means to identify areas of ethical leadership for further development.

☐ Other (specify):

Open-Ended Questions: A few questions ask you to describe something, list something, or provide an example. To interpret your answers to these questions you must deliberate and analyze the degree to which your facility's approaches are *comprehensive, systematic, broadly deployed,* and*/or well integrated.*

Open-Ended Example:

3.14 Describe an example of how preventive ethics helped to improve ethical practices in your facility and an example of when it failed to do so. How do you explain the different outcomes? What do you think were the critical differences in these situations?

> Any response is desirable.

Additional Information

Following each question, information is provided that directs you to resources relevant to that question. The majority of materials are available on the IntegratedEthics website (vaww.ethics.va.gov/IntegratedEthics). For materials that are not available on or linked to the IntegratedEthics website, information is provided on how to access these additional materials.

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Section 1. Overall Ethics Program

Questions

1.1   Which of the following are included in your facility's approach to accountability for your ethics program? (Mark all that apply.)

☐   A designated individual (e.g., Ethics Consultation Coordinator) is responsible for managing the program's ethics consultation activities.

☐   A designated individual (e.g., Preventive Ethics Coordinator) is responsible for managing the program's preventive ethics activities.

☐   A designated individual (e.g., Ethical Leadership Coordinator) is responsible for managing the program's ethical leadership activities.

☐   A senior manager (e.g., Ethical Leadership Coordinator) is responsible for the success of the ethics program.

☐   A designated individual (e.g., IntegratedEthics Program Officer) is responsible for the day-to-day management of the ethics program.

☐   A group (e.g., IntegratedEthics Council) is responsible for overseeing the implementation and operations of the ethics program.

Other (specify):

Resources that describe the standard: Monograph—*IntegratedEthics: Improving Ethics Quality in Health Care,* pp. 8–10 (Program management); Primers—*Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 22 (Critical success factors– accountability); *Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 21-22 (Critical success factors– accountability).

Tools to help meet the standard: IntegratedEthics Toolkit—Roles & Responsibilities for each of the following: IntegratedEthics Program Officer, Ethical Leadership Coordinator, Ethics Consultation Coordinator, and Preventive Ethics Coordinator, IntegratedEthics Council Members (Tab 2).

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1.2 Which of the following best describes your facility's policy on your ethics program? (Mark only one.)

☐ Our facility does not have a policy.

☐ Our facility has a policy with the following elements:

YES	NO	POLICY ELEMENTS
☐	☐	The role and function of the ethics consultation service
☐	☐	The role and function of preventive ethics
☐	☐	The role and function of ethical leadership
☐	☐	The role and responsibilities of the individual responsible for overall management of the ethics program
☐	☐	The role and responsibilities of the senior manager who is accountable for the success of the ethics program
☐	☐	The goals of the IntegratedEthics Council
☐	☐	The membership of the IntegratedEthics Council
☐	☐	How the quality of the ethics program is to be assessed and ensured
☐	☐	Other (specify):

Resources that describe the standard: Monograph—*IntegratedEthics: Improving Ethics Quality in Health Care* (Program management, pp. 8–10); Primers—*Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 23 (Critical success factors–policy); *Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 23–24 (Critical success factors–policy); IntegratedEthics Toolkit—Roles & Responsibilities for each of the following: IntegratedEthics Program Officer, Ethics Consultation Coordinator, Preventive Ethics Coordinator, Ethical Leadership Coordinator and IntegratedEthics Council Members (Tab 2).

1.3 At your facility, how do senior leaders learn about the activities of your ethics program? (Mark all that apply.)

☐ Senior leaders request information about the activities of the ethics program on an *ad hoc* basis.

☐ Senior leaders require routine reporting about the activities of the ethics program (e.g., through presentations to a top corporate decision-making body or through written reports).

☐ Senior leaders directly observe or participate in the ethics program (e.g., attend ethics program meetings, chair the IntegratedEthics Council).

☐ Other (specify):

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* p. 38 (Champion the program).

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1.4 At your facility, which of the following approaches are used to educate staff about how to recognize and respond to ethical concerns? (Mark all that apply.)

☐ Our facility has no formal approach to educating staff about how to recognize and respond to ethical concerns.

☐ Our facility offers education for new staff about how to recognize and respond to ethical concerns.

☐ Our facility requires education for new staff about how to recognize and respond to ethical concerns.

☐ Our facility offers education for all staff about how to recognize and respond to ethical concerns.

☐ Our facility requires education for all staff about how to recognize and respond to ethical concerns.

☐ Other (specify):

Resources that describe the standard: Primers—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 23–25 (Prove that ethics matters to you); *Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 20–21 (Critical success factors–access); IntegratedEthics Toolkit—Roles & Responsibilities for IntegratedEthics Council Members (Tab 2).

Tool to help meet the standard: IntegratedEthics online learning module, "Ethics in Health Care."

1.5 Which of the following best describes how your facility educates staff about the existence and functions of IntegratedEthics? (Mark only one.)

☐ Our facility does not educate staff about the existence and functions of IntegratedEthics.

☐ Our facility educates some staff about the existence and functions of IntegratedEthics

☐ Our facility educates all staff about the existence and functions of IntegratedEthics.

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 23–25 (Prove that ethics matters to you).
IntegratedEthics Toolkit—Roles & Responsibilities for the IntegratedEthics Program Officer and IntegratedEthics Council Members (Tab 2);

Tools to help meet the standard: Video—*IntegratedEthics: Improving Ethics Quality in Health Care,* a brief overview of IntegratedEthics, is available through their IntegratedEthics Program Officer; the monograph of the same title; PowerPoint—Introduction to IntegratedEthics.

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1.6 For each of the content areas listed below, characterize your facility's educational activities relating to ethics in the last year by providing the requested information. Include educational activities that focus on rules as well as those that focus on values.

Content	Mode (e.g., lecture, video, web-based)	Topic (e.g., advance directives, integrity in financial management)	Target Audience (group for which the education was designed)	Approximate % of Target Audience Trained
Time period within which educational activities	*occurred:*		*(start date)*	*(end date)*
Shared Decision Making with Patients				
Ethical Practices in End-of-Life Care				
Patient Privacy and Confidentiality				
Professionalism in Patient Care				
Ethical Practices in Resource Allocation				

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1.6 (Continued) For each of the content areas listed below, characterize your facility's educational activities relating to ethics in the last year by providing the requested information. Include educational activities that focus on rules as well as those that focus on values.

Content	Mode (e.g., lecture, video, web-based)	Topic of Activity (e.g., advance directives, integrity in financial management)	Target Audience (groups for whom the education was designed)	Approximate % of Target Audience Trained
Time period within which educational activities occurred:		*(start date)*		*(end date)*
Ethical Practices in Business and Management				
Ethical Practices in Government Service				
Ethical Practices in Research				
Ethical Practices in the Everyday Workplace				
IntegratedEthics Program				
Other				

Resources that describe the standard: IntegratedEthics Toolkit—Roles & Responsibilities for the IntegratedEthics Program Officer and IntegratedEthics Council members (Tab 2).

Tools to help meet the standard: Monograph—*IntegratedEthics: Improving Ethics Quality in Health Care;* Other—IntegratedEthics video courses; IntegratedEthics online learning modules; online Ethics Resources.

1.7 Characterize your facility's approach to ensuring that ethics-related activities are well integrated throughout the facility. Such activities include, for example, protecting human research subjects, conducting ethics consultations, promoting business integrity, ensuring adherence to government ethics rules, preventing discrimination in hiring practices, and preparing for Joint Commission accreditation

Resources that describe the standard: Monograph—*IntegratedEthics: Improving Ethics Quality in Health Care,* pp. 8–10 (Program management); Integrated Ethics Toolkit—Roles & Responsibilities of the Integrated Ethics Program Officer and IntegratedEthics Council Members (Tab 2).

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1.8 Which of the following best describes your facility's approach to ensuring that individuals performing ethics activities have access to needed resources, such as library materials, clerical services, and training? (Mark only one.)

☐ Our facility does not have an approach to ensuring that individuals performing ethics activities have needed resources.

☐ Our facility considers requests to provide resources for the ethics program on a case-by-case basis.

☐ Our facility provides resources for the ethics program through a specific budget allocation.

☐ Other (specify):

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 37–39 (Champion the program).

1.9 Which of the following describes your facility's approach to designating percentage of time (FTEE) for IntegratedEthics positions at the time of completing this workbook? (Mark all that apply.)

☐ Our facility designates a percentage of time (FTEE) for the IntegratedEthics Program Officer position at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%

☐ Our facility designates a percentage of time (FTEE) for the Ethics Consultant Coordinator position at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%

☐ Our facility designates a percentage of time (FTEE) for the Preventive Ethics Coordinator position at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%

☐ Our facility designates a percentage of time (FTEE) for another IntegratedEthics position (describe :_____) at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%

☐ Our facility designates a percentage of time (FTEE) for another IntegratedEthics position (describe :_____) at the time that this workbook is being completed. If checked, what percentage of time is designated? _____%

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Section 2. Ethics Consultation

Questions

2.1 Which of the following best describes your facility's approach to ethics consultation; i.e., responding to ethics questions that arise in health care? <u>(Mark only one.)</u>

☐ Our facility does not perform ethics consultation.

☐ Our facility performs ethics consultation, but the approach is variable (e.g., it varies depending on who is involved).

☐ Our facility has a well-defined approach to ethics consultation that is consistently followed.

<u>Resources that describe the standard:</u> Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 25-48 (CASES: A Step-by-Step Approach to Ethics Consultation); Video—Ethics consultation video course.

<u>Tools to help meet the standard:</u> CASES pocket card; ECWeb.

2.2 Which of the following steps are <u>consistently</u> included in your facility's approach to ethics consultations that pertain to an <u>active clinical case?</u>

YES	NO	STEPS
		Clarify the consultation request
☐	☐	Characterize the type of consultation request
☐	☐	Obtain preliminary information from the requester
☐	☐	Establish realistic expectations about the consultation process
☐	☐	Formulate the ethics question
		Assemble the relevant information
☐	☐	Consider the types of information needed
☐	☐	Identify the appropriate sources of information
☐	☐	Gather information systematically from each source
☐	☐	Summarize the consultation and the ethics question
		Synthesize the information
☐	☐	Determine whether a formal meeting is needed
☐	☐	Engage in ethical analysis
☐	☐	Identify the ethically appropriate decision maker
☐	☐	Facilitate moral deliberation among ethically justifiable options

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		Explain the synthesis
☐	☐	Communicate the synthesis to key participants
☐	☐	Provide additional resources
☐	☐	Document the consultation in the health record
☐	☐	Document the consultation in consultation service records
		Support the consultation process
☐	☐	Follow up with participants
☐	☐	Evaluate the consultation
☐	☐	Adjust the consultation process
☐	☐	Identify underlying systems issues
☐	☐	Other (specify):

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 26–48 (CASES: A Step-by-Step Approach to Ethics Consultation); Video—Ethics consultation video course.

Tools to help meet the standard: CASES pocket card; ECWeb.

2.3 Which of the following responses best describes who has responsibility for the ethics consultation service at your facility? (Mark only one.)

☐ No individual or group has specific responsibility for the ethics consultation service.

☐ Two or more individuals are jointly responsible for the ethics consultation service.

☐ One individual is solely responsible for the ethics consultation service.

☐ One individual is responsible for the ethics consultation service, and for overseeing other individuals who have specific ethics consultation responsibilities.

☐ Other (specify):

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 22 (Critical success factors–accountability); IntegratedEthics Toolkit—Roles & Responsibilities of the Ethics Consultation Coordinator (Tab 2) (also Ethics Consultation Toolkit, Tab 2).

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2.4 Which of the following are included in your facility's approach to ensuring that your ethics consultation service is held accountable for the quality of its work? (Mark all that apply.)

☐ Our facility does not have an approach to ensuring the accountability of our ethics consultation service.

☐ Ethics consultants are held accountable in a general way for the quality of the consultations they perform.

☐ Ethics consultants are held accountable through performance reviews that explicitly address ethics consultation.

☐ A designated individual is held accountable in a general way for the quality of the facility's ethics consultation activities.

☐ A designated individual is held accountable through a performance review that explicitly addresses the quality of the facility's ethics consultation activities.

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 22 (Critical success factors–accountability).

Tool to help meet the standard: Ethics Consultation Feedback Tool.

2.5 Which of the following are included in your facility's approach to providing staff time for ethics consultation activities? (Mark all that apply.)

☐ Managers approve time for ethics consultation, but do not arrange for release or coverage of consultants' other work responsibilities.

☐ Managers approve time for ethics consultation and arrange for release or coverage of consultants' other work responsibilities, as needed.

☐ Managers ensure one or more ethics consultants have dedicated time to perform ethics consultation.

☐ Other (specify):

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 19–20 (Critical success factors–staff time); *Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 37–39 (Support your local ethics program).

2.6 Which of the following best describes your facility's approach to assessing whether ethics consultants have the requisite knowledge and skills? (Mark only one.)

☐ We do not assess ethics consultants' knowledge and skills.

☐ We assess ethics consultants' knowledge and skills only if someone questions their proficiency or suggests there is a problem.

☐ We assess ethics consultants' knowledge and skills, but we do not use explicit standards.

☐ We assess ethics consultants' knowledge and skills through a systematic process and against explicit standards (e.g., using the Ethics Consultant Proficiency Assessment Tool).

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 22–23 (Critical success factors–evaluation).

Tools to help meet the standard: Ethics Consultant Proficiency Assessment Tool; Advanced Proficiency Tracking Log.

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2.7 Which of the following describes how ethics consultants in your facility learn to perform ethics consultation? (Mark all that apply.)

☐ Ethics consultants learn through self-study.

☐ Ethics consultants learn by observing more experienced members.

☐ Ethics consultants learn by receiving specific performance feedback from more experienced members.

☐ Ethics consultants learn by receiving feedback from requesters and/or patients, families or surrogates.

☐ Ethics consultants learn by completing a specific curriculum.

☐ Ethics consultants learn by following a specific plan for continuous professional development.

☐ Other (specify):

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 18–24 (Introduction to ethics consultation); Video—Ethics consultation video course.

Tools to help meet the standard: IntegratedEthics *o*nline learning modules; Ethics Consultation Feedback Tool.

2.8 Which of the following are included in your facility's approach to educating ethics consultants? (Mark all that apply.)

☐ Our facility does not offer education for ethics consultants.

☐ Our facility provides education for ethics consultants about a broad range of topics in ethics (e.g., informed consent, workplace boundaries).

☐ Our facility provides education for ethics consultants that include thorough instruction about how to perform ethics consultation.

☐ Our facility requires education for ethics consultants about a broad range of topics in ethics (e.g., informed consent, workplace boundaries).

☐ Our facility requires education for ethics consultants that includes thorough instruction about how to perform ethics consultation.

☐ Other (specify):

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 20 (Critical success factors–resources).

Tools to help meet the standard: Ethics consultation video course; IntegratedEthics online learning modules.

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2.9 Which of the following best describes how your facility informs <u>patients and families</u> about the availability of the ethics consultation service at your facility? (<u>Mark only one.</u>)

☐ Patients and families are generally not informed.

☐ Patients and families are informed by staff only when it seems relevant.

☐ Patients and families in some units and settings are provided written information about the service (e.g., brochures, newsletters, posters).

☐ Patients and families in all units and settings are provided written information about the service (e.g., brochures, newsletters, posters).

<u>Resources that describe the standard:</u> Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 20–21 (Critical success factors–access).

2.10 Which of the following best describes how your facility informs sta<u>ff ab</u>out the availability of the ethics consultation service at your facility? (<u>Mark only one.</u>)

☐ Staff members are generally not informed.

☐ Staff members are informed through word of mouth on an *ad hoc* basis.

☐ Staff members in some departments, units and settings are provided information about the service through some regular mechanism(s) (e.g., brochures, newsletters, posters).

☐ Staff members in all departments, units and settings are provided information about the service through some regular mechanism(s) (e.g., brochures, newsletters, posters).

<u>Resources that describe the standard:</u> Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 20–21 (Critical success factors–access).

2.11 Which of the following best describes the availability of your facility's ethics consultation service? (<u>Mark only one.</u>)

☐ Our service has no regular hours, but is available by special request.

☐ Our service is available during normal work hours.

☐ Our service is available during normal work hours with variable availability on nights, weekends, and holidays.

☐ Our service is available 24 hours a day, 7 days a week.

<u>Resources that describe the standard:</u> Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 20–21 (Critical success factors–access).

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2.12 Which of the following best describes how responsive your facility's ethics consultation service is to <u>urgent</u> requests? <u>(Mark only one.)</u>

☐ One or more members of the ethics consultation service will almost always communicate with the requester within 3 business days.

☐ One or more members of the ethics consultation service will almost always communicate with the requester within one day (i.e., 24 hours).

☐ One or more members of the ethics consultation service will almost always communicate with the requester within hours (i.e., on the same business day).

<u>Resources that describe the standard:</u> Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* pp. 20–21 (Critical success factors–access).

2.13 Which of the following best describes your facility's policy that addresses ethics consultation? <u>(Mark only one.)</u>

☐ Our facility does not have a policy that addresses ethics consultation.

☐ Our facility has a policy that addresses ethics consultation with the following elements:

YES	NO	POLICY ELEMENTS
☐	☐	The goals of ethics consultation
☐	☐	Who may perform ethics consultation
☐	☐	The education and/or training required of an ethics consultant
☐	☐	Who may request an ethics consultation
☐	☐	What requests are appropriate for the ethics consultation service
☐	☐	What requests are appropriate for ethics case consultation
☐	☐	Which consultation model(s) may be used and when
☐	☐	Who must be notified when an ethics consultation has been requested
☐	☐	How participants' confidentiality is to be protected
☐	☐	How ethics consultations are to be performed
☐	☐	How ethics consultations are to be documented
☐	☐	Who is accountable for the ethics consultation service
☐	☐	How the quality of ethics consultation is to be assessed and ensured

<u>Resources that describe the standard:</u> Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 23 (Critical success factors–policy).

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2.14   Which of the following approaches best describes how your facility evaluates the ethics consultation service? (Mark only one.)

☐   Our service is not evaluated.

☐   Our service is occasionally evaluated on the following factors:

☐   Our service is regularly evaluated on the following factors:

YES	NO	FACTORS EVALUATED
☐	☐	Integration: the ethics consultation service is well integrated with other components of the organization (e.g., utilized by multiple services and programs at your facility)
☐	☐	Leadership support: the ethics consultation service is adequately supported by leadership
☐	☐	Expertise: ethics consultants have the knowledge and skills required to perform ethics consultation competently
☐	☐	Staff member time: ethics consultants have adequate time to perform ethics consultation effectively
☐	☐	Resources: ethics consultants have ready access to the resources they need
☐	☐	Access: the ethics consultation service is can be reached in a timely way by those it serves
☐	☐	Accountability: there is clear accountability for ethics consultation within the facility's reporting hierarchy
☐	☐	Organizational learning: the ethics consultation service disseminates its experience and findings effectively
☐	☐	Evaluation: the ethics consultation service continuously improves the quality of its work through systematic assessment
☐	☐	Policy: the structure, function, and processes of ethics consultation are formalized in institutional policy
☐	☐	CASES approach: ethics case consultations are performed in accordance with the CASES approach (as outlined in the IntegratedEthics primer, *Ethics Consultation: Responding to Ethics Questions in Health Care)*
☐	☐	Goals: the ethics consultation service meets its professed goals
☐	☐	Other (specify):

Resources that describe the standard: Primer—*Ethics Consultation: Responding to Ethics Questions in Health Care,* p.18–24 (Critical success factors); Integrated Ethics Toolkit—Roles & Responsibilities of IntegratedEthics Council members (Tab 2).
Tools to help meet the standard: Ethics Consultation Proficiency Assessment Tool; Ethics Consultation Advanced Proficiency Log; Ethics Consultation Feedback Tool; ECWeb.

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2.15 Which of the following best describes your facility's approach to documenting in ECWeb ethics consultations pertaining to <u>cases</u>? (Mark only one)

☐ Ethics Consultation Service does not use ECWeb to document ethics consultations pertaining to cases

☐ Ethics Consultation Service uses ECWeb to document ethics consultations pertaining to cases, but its use is variable (e.g., it varies depending on who is involved)

☐ Ethics Consultation Service uses ECWeb consistently to document ethics consultations pertaining to cases

<u>Resources that describe the standard:</u> *Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 46
(*http://vaww.ethics.va.gov/docs/integratedethics/Ethics_Consultation_Responding_to_Ethics_Questions_in_Health_Care_20070808.pdf); VHA Handbook 1004.06 IntegratedEthics*, p. 5
(*http://vaww.ethics.va.gov/docs/policy/VHA_Handbook_1004-06_IntegratedEthics_20090616.pdf*)

<u>Tools to help meet the standard:</u> *ECWeb: A Quality Improvement Tool for Ethics Consultation; Online Learning Module (http://www.ethics.va.gov/ecweb/default.htm)*

2.16 Which of the following best describes your facility's approach to documenting in ECWeb ethics consultations pertaining to <u>non-cases</u>? (Mark only one)

☐ Ethics Consultation Service does not use ECWeb to document ethics consultations pertaining to non-cases

☐ Ethics Consultation Service uses ECWeb to document ethics consultations pertaining to non-cases, but its use is variable (e.g., it varies depending on who is involved)

☐ Ethics Consultation Service uses ECWeb consistently to document ethics consultations pertaining to non-cases

<u>Resources that describe the standard:</u> *Ethics Consultation: Responding to Ethics Questions in Health Care,* p. 46
(*http://vaww.ethics.va.gov/docs/integratedethics/Ethics_Consultation_Responding_to_Ethics_Questions_in_Health_Care_20070808.pdf); VHA Handbook 1004.06 IntegratedEthics*, p. 5
(*http://vaww.ethics.va.gov/docs/policy/VHA_Handbook_1004-06_IntegratedEthics_20090616.pdf*)

<u>Tools to help meet the standard:</u> *ECWeb: A Quality Improvement Tool for Ethics Consultation; Online Learning Module (http://www.ethics.va.gov/ecweb/default.htm)*

2.17 Describe specific examples of how formal evaluation(s) of the ethics consultation service have been used to improve the quality of ethics consultations at your facility. These examples could include feedback on a specific consult, assessment of an individual consultant, or systematic assessment of the entire program (e.g., Ethics Consultation Proficiency Assessment Tool, Ethics Consultation Feedback Tools).

2.18 Describe an example of how ethics consultation helped to improve ethical practices in your facility, and an example of when it failed to do so. How do you explain the different outcomes? What do you think were the critical differences in these situations?

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Section 3. Preventive Ethics

Questions

3.1 Which of the following best describes your facility's approach to preventive ethics, i.e., activities performed by an individual or group on behalf of a health care organization to identify, prioritize, and address ethics quality gaps? (Mark only one.)

☐ Our facility does not have a specific approach to preventive ethics.

☐ Our facility has an approach to preventive ethics, but the approach is variable (e.g., it varies depending on who is involved).

☐ Our facility has a well-defined approach that is consistently followed.

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 25-54 (ISSUES: A Step-by-Step Approach to Preventive Ethics).

Tools to help meet the standard: ISSUES Storyboard; Summary of ISSUES Cycles; ISSUES pocket card.

3.2 Which of the following steps are <u>consistently</u> included in your facility's approach to preventive ethics?

YES	NO	STEPS
		Identify an Issue
☐	☐	Be proactive in identifying ethical issues
☐	☐	Characterize each issue
☐	☐	Clarify each issue by listing the improvement goal
☐	☐	Prioritize the issues and select one
		Study the Issue
☐	☐	Diagram the process behind the relevant practice
☐	☐	Gather specific data about best practices
☐	☐	Gather specific data about current practices
☐	☐	Refine the improvement goal to reflect the ethics quality gap
		Select a Strategy
☐	☐	Identify the major cause(s) of the ethics quality gap
☐	☐	Brainstorm possible strategies to narrow the gap
☐	☐	Choose one or more strategies to try
		Undertake a Plan
☐	☐	Plan how to carry out the strategy

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YES	NO	STEPS
☐	☐	Plan how to evaluate the strategy
☐	☐	Execute the plan
		Evaluate and Adjust
☐	☐	Check the execution and the results
☐	☐	Adjust as necessary
☐	☐	Evaluate your ISSUES process
		Sustain and Spread
☐	☐	Sustain the improvement
☐	☐	Disseminate the improvement
☐	☐	Continue monitoring
☐	☐	Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 25–54 (ISSUES: A Step-by-Step Approach to Preventive Ethics); Video—Preventive ethics video course.

Tools to help meet the standard: ISSUES pocket card; ISSUES Storyboard.

3.3 Which of the following responses best describes who has responsibility for preventive ethics activities at your facility? (Mark only one.)

☐ No individual or group has specific responsibility for preventive ethics activities.

☐ Two or more individuals are jointly responsible for preventive ethics activities.

☐ One individual is solely responsible for preventive ethics activities.

☐ One individual is responsible for preventive ethics activities, and for overseeing other individuals who have specific preventive ethics responsibilities.

☐ Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 15–17 (models for performing preventive ethics); pp. 21–22 (Critical success factors–accountability).

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3.4   Which of the following are included in your facility's approach to ensuring your preventive ethics program is held accountable for the quality of its work? (Mark all that apply.)

☐ Our facility does not have an approach to ensuring the preventive ethics program is held accountable for the quality of preventive ethics activities.

☐ Two or more individuals are held accountable informally through supervisory oversight for the quality of the preventive ethics activities they perform.

☐ Two or more individuals are held accountable through performance reviews that explicitly address the quality of the preventive ethics activities they perform.

☐ A designated individual is held accountable informally through supervisory oversight for the quality of the preventive ethics activities they perform.

☐ A designated individual is held accountable through a performance review that explicitly addresses the quality of the facility's preventive ethics activities.

☐ Our preventive ethics program is held accountable for the quality of preventive ethics activities through reports of its activities to a committee or council.

☐ Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* p. 21 (Critical success factors–accountability); Integrated Ethics Toolkit—Roles & Responsibilities of the Preventive Ethics Coordinator (Tab 2) (also Preventive Ethics Toolkit, Tab 2).

3.5   Which of the following are included in your facility's approach to providing staff member time for preventive ethics activities? (Mark all that apply.)

☐ Managers approve time for those responsible for preventive ethics to perform this activity, but do not arrange for release or coverage of their other work responsibilities.

☐ Managers approve time for those responsible for preventive ethics to perform this activity and arrange for release or coverage of their other work responsibilities, as needed.

☐ Managers ensure one or more individuals responsible for preventive ethics have dedicated time to perform this activity.

☐ Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* p. 20 (Critical success factors–staff time); *Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 37–39 (Support your local ethics program).

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3.6 Which of the following are included in your facility's approach to educating individuals who perform preventive ethics activities? (Mark all that apply.)

☐ Our facility does not provide education on preventive ethics to individuals who perform preventive ethics activities.

☐ Some staff members who perform preventive ethics activities are <u>offered</u> education on preventive ethics.

☐ All staff members who perform preventive ethics activities are <u>offered</u> education on preventive ethics.

☐ Some staff members who perform preventive ethics activities are <u>required</u> to receive education on preventive ethics.

☐ All staff members who perform preventive ethics activities are required to receive education on preventive ethics.

☐ Other (specify):

<u>Resources that describe the standard:</u> Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* p. 20 (Critical success factors–resources).

<u>Tools to help meet the standard:</u> Preventive ethics video course; IntegratedEthics online learning modules; Integrated Ethics slides.

3.7 In which of the following areas does at least one individual with responsibility for preventive ethics have a high level of proficiency? (Mark all that apply.)

☐ Knowledge of quality improvement principles, methods, and practices

☐ Knowledge of relevant organizational environment(s)

☐ Knowledge of organizational change strategies

☐ Knowledge of ethics topics and concepts

☐ Skill in moral reasoning

☐ Skill in systems thinking

☐ Other (specify):

<u>Resources that describe the standard:</u> Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* p.18 (proficiencies), p. 20 (Critical success factors–expertise).

<u>Tools to help meet the standard:</u> IntegratedEthics online learning modules.

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3.8 Which sources does the individual responsible for preventive ethics (e.g., Preventive Ethics Coordinator) routinely contact to identify ethical issues that may benefit from a preventive ethics approach? (Mark all that apply.)

☐ No sources are routinely contacted.

☐ Our facility's ethics consultation service

☐ Senior management/executive leadership body

☐ IntegratedEthics Council (facility-level)

☐ Service leaders/program heads

☐ Quality management

☐ Human resources

☐ Fiscal services

☐ Compliance and business integrity

☐ Patient safety

☐ Research service

☐ VISN IntegratedEthics Point of Contact

☐ Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* p. 21 (Critical success factors–access); IntegratedEthics Toolkit— Roles & Responsibilities of the IntegratedEthics Program Officer, Preventive Ethics Coordinator, IntegratedEthics Council members (Tab 2).

3.9 Which approaches are used at your facility to disseminate information about preventive ethics activities, including "lessons learned"? (Mark all that apply.)

☐ No information is disseminated to staff.

☐ Information is disseminated at senior executive meetings.

☐ Information is disseminated at managers' meetings.

☐ Information is disseminated at staff meetings.

☐ Information is presented on posters or bulletin boards.

☐ Information is presented through newsletters, all-staff emails, or reports.

☐ Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 53–54 (Step 6: Sustain and Spread); IntegratedEthics Toolkit— Roles & Responsibilities of the Preventive Ethics Coordinator (Tab 2) (also Preventive Ethics Toolkit, Tab 2)

Tool to help meet the standard: Summary of ISSUES Cycles.

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3.10 Which of the following best describes your facility's policy that addresses preventive ethics? (Mark only one.)

☐ Our facility does not have a policy that addresses preventive ethics.

☐ Our facility has a policy that addresses preventive ethics with the following elements:

YES	NO	POLICY ELEMENTS
☐	☐	The goals of preventive ethics
☐	☐	Who is to perform preventive ethics
☐	☐	The education and/or training required of those who perform preventive ethics
☐	☐	What activities fall within the mandate of preventive ethics
☐	☐	What issues are appropriate for the preventive ethics team to consider
☐	☐	How issues are to be identified, prioritized, and addressed
☐	☐	Which issues require a quality improvement approach
☐	☐	How the confidentiality of participants is to be protected
☐	☐	How preventive ethics activities are to be performed
☐	☐	How preventive ethics activities are to be documented
☐	☐	Who is accountable for preventive ethics
☐	☐	How the quality of preventive ethics is to be assessed and ensured

Resources to describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* pp. 23–24 (Critical success factors–policy; IntegratedEthics Toolkit—Roles & Responsibilities of the Preventive Ethics Coordinator and IntegratedEthics Council members (Tab 2)(also Preventive Ethics Toolkit, Tab 2).

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3.11 Which of the following best describes how your facility evaluates preventive ethics? (Mark only one.)

☐ Our facility does not evaluate preventive ethics.

☐ Our facility occasionally evaluates the preventive ethics program on the following factors:

☐ Our facility regularly evaluates the preventive ethics program on the following factors:

YES	NO	FACTORS EVALUATED
☐	☐	Integration: preventive ethics is well integrated with other ethics-related activities in the facility
☐	☐	Leadership support: preventive ethics is adequately supported by leadership
☐	☐	Expertise: individuals performing preventive ethics have the required knowledge and skills to perform preventive ethics competently
☐	☐	Staff time: individuals performing preventive ethics have adequate time to perform preventive ethics effectively
☐	☐	Resources: individuals performing preventive ethics have ready access to the resources they need
☐	☐	Access: staff knows when and how to refer issues to those responsible for performing preventive ethics
☐	☐	Accountability: there is clear accountability for preventive ethics within the facility's reporting hierarchy
☐	☐	Organizational learning: those responsible for preventive ethics disseminate their experience and findings effectively
☐	☐	Evaluation: those responsible for preventive ethics continuously improve the quality of their work through systematic assessment
☐	☐	Policy: the structure, function and processes of preventive ethics are formalized in institutional policy
☐	☐	ISSUES approach: ethics issues are addressed in accordance with the "ISSUES" approach (as outlined in the IntegratedEthics primer, *Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level)*
☐	☐	Goals: preventive ethics is meeting its professed goals
☐	☐	Other (specify):

Resources that describe the standard: Primer—*Preventive Ethics: Addressing Ethics Quality Gaps on a Systems Level,* p.22–23 (Critical success factors–evaluation), pp. 51–52 (Step 5: Evaluate and Adjust); IntegratedEthics Toolkit—Roles & Responsibilities of IntegratedEthics Council Members (Tab 2).
Tool to help meet the standard: ISSUES Storyboard.

3.12 Describe specific examples of how evaluation(s) have been used to improve the quality of preventive ethics at your facility.

3.13 Describe an example of how preventive ethics helped to improve ethical practices in your

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facility and an example of when it failed to do so. How do you explain the different outcomes? What do you think were the critical differences in these situations?

Section 4. Ethical Leadership

Questions

4.1 Which of the following responses best describes who has responsibility for overseeing ethical leadership at your facility? (Mark only one.)

☐ No individual or group has specific responsibility for overseeing ethical leadership.

☐ Two or more individuals are jointly responsible for overseeing ethical leadership.

☐ One individual is solely responsible for overseeing ethical leadership.

☐ One individual is responsible for overseeing ethical leadership, and for promoting ethical leadership among other facility leaders.

☐ Other (specify):

Resources that describe the standard: Monograph—*IntegratedEthics: Improving Ethics Quality in Health Care,* pp. 8–10 (Program management)(also Primer—*Ethical Leadership: Fostering an Ethical Environment and Culture,* pp. 8–10), IntegratedEthics Toolkit—Roles & Responsibilities of the Ethical Leadership Coordinator (Tab 2) (also Ethical Leadership Toolkit, Tab 2).

4.2 At your facility, which approaches do senior leaders commonly use to communicate specific expectations for ethical practices? (Mark all that apply.)

☐ Oral communication by leaders (e.g., staff meetings, town hall meetings)

☐ Written communication by leaders (e.g., executive memoranda)

☐ Policies

☐ New employee orientation

☐ Other (specify):

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 27–30 (Communicate clear expectations for ethical practice); Video— Ethical leadership video course.
Tool to help meet the standard: Ethical Leadership Self-Assessment Tool.

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4.3 At your facility, in what ways are ethical practices acknowledged and reinforced by leaders? (Mark all that apply.)

- ☐ Ethical practices are acknowledged on an ad hoc basis (e.g., feedback to an individual employee).
- ☐ Ethical practices are formally acknowledged (e.g., recognition at staff meetings).
- ☐ There is zero tolerance for unethical practices.
- ☐ Ethical practices are acknowledged through a specific awards program.
- ☐ Ethical practices are identified in employees' performance plans.
- ☐ Other (specify):

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 17–19 (How do leaders affect their organization's ethical environment and culture?); Video—Ethical leadership video course.

Tool to help meet the standard: Ethical Leadership Self-Assessment Tool.

4.4 How does your top corporate decision-making body ensure that it adequately considers the ethical aspects of major decisions? (Mark all that apply.)

Identify the corporate decision-making body here:

- ☐ This corporate decision-making body has no formal mechanism to ensure that it considers ethical aspects of major decisions.
- ☐ This corporate decision-making body includes a member with recognized expertise in ethics.
- ☐ This corporate decision-making body refers ethical concerns or issues to the facility's ethics committee or IntegratedEthics program.
- ☐ This corporate decision-making body uses a decision-making model or template that prompts it to consider the ethical aspects of major decisions.
- ☐ Other (specify):

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 31–34 (Identify decisions that raise ethical concerns and Address ethical decisions systematically); Video—Ethical leadership video course.

Tool to help meet the standard: Ethical Leadership Self-Assessment Tool.

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4.5 How does your <u>second</u> corporate decision-making body ensure that it adequately considers the ethical aspects of major decisions? <u>(Mark all that apply.)</u>

Identify the corporate decision-making body here: _____

☐ This corporate decision-making body has no formal mechanism to ensure that it considers ethical aspects of major decisions.

☐ This corporate decision-making body includes a member with recognized expertise in ethics.

☐ This corporate decision-making body refers ethical concerns or issues to the facility's ethics committee or IntegratedEthics program.

☐ This corporate decision-making body uses a decision-making model or template that prompts it to consider the ethical aspects of major decisions.

☐ Other (specify):

<u>Resources that describe the standard:</u> Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 31–32 (Identify decisions that raise ethical concerns); Video—Ethical leadership video course.

<u>Tool to help meet the standard:</u> Ethical Leadership Self-Assessment Tool.

4.6 At your facility, how do leaders involve <u>patients and/or Veteran representatives</u> in major organizational decisions that affect Veterans and have ethical implications (e.g., closing a patient care unit)? <u>(Mark only the most common approach.)</u>

☐ Patients and/or Veteran representatives are not involved.

☐ Patients and/or Veteran representatives may express their views in an unplanned or *ad hoc* manner.

☐ Patients and/or Veteran representatives are invited or asked to express their views.

☐ Patients and/or Veteran representatives participate routinely in the decision-making process.

☐ Other (specify):

<u>Resources that describe the standard:</u> Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* p. 32–34 (Address ethical decisions systematically).
<u>Tool to help meet the standard:</u> Quality Check.

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4.7   At your facility, how do leaders involve <u>clinical staff members</u> in major organizational decisions that affect clinical care and have ethical implications (e.g., closing a patient care unit)? <u>(Mark only the most common approach.)</u>

☐   Clinical staff members are not involved.

☐   Clinical staff members express their views in an unplanned or *ad hoc* manner.

☐   Clinical staff members are invited or asked to express their views.

☐   Clinical staff members participate routinely in the decision-making process.

☐   Other (specify):

<u>Resources that describe the standard:</u> Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 32–34 (Address ethical decisions systematically).

<u>Tools to help meet the standard:</u> Quality Check; Ethical Leadership Self-Assessment Tool; ethical leadership video course.

4.8   At your facility, how do leaders involve staff members in major organizational decisions that have ethical implications (e.g., reducing the workforce)? <u>(Mark only the most common approach.)</u>

☐   Staff members are not involved.

☐   Staff members may express their views in an unplanned or *ad hoc* manner.

☐   Staff members are invited or asked to express their views.

☐   Staff members participate routinely in the decision-making process.

☐   Other (specify):

<u>Resources that describe the standard:</u> Primer—*Ethical Leadership: Fostering an Ethical Environment and Culture,* pp. 32–34 (Address ethical decisions systematically); Video—Ethical leadership video course.

<u>Tools to help meet the standard:</u> Quality Check; Ethical Leadership Self-Assessment Tool.

4.9   Consider the <u>last major **clinical** decision</u> made by leaders at your facility that had ethical implications for staff members and/or patients (e.g., closing a patient care unit, implementing a significant change in procedures). Which approaches were used to explain the decision? <u>(Mark all that apply.)</u>

Identify the decision here:

4.9a Staff

☐   No explanation for the decision was provided to the affected staff members.

☐   Leaders provided the affected staff members with a justification for the final decision.

☐   Leaders explained the pros and cons of the options considered to the affected staff members.

☐   Leaders informed the affected staff members about the process used in making

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the decision, including who had input into the decision.

☐ Other (specify):

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4.9b Patients and/or Veteran Representatives

☐ No explanation for the decision was provided to patients and/or Veteran representatives.

☐ Leaders provided patients and/or Veteran representatives with a justification for the final decision.

☐ Leaders explained the pros and cons of the options considered to patients and/or Veteran representatives.

☐ Leaders informed patients and/or Veteran representatives about the process used in making the decision, including who had input into the decision.

☐ Other (specify):

a and b. <u>Resources that describe the standard:</u> Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* p. 35 (Explain your decisions).

<u>Tools to help meet the standard:</u> Quality Check; Ethical Leadership Self-Assessment Tool.

4.10 Consider the <u>last major</u> **nonclinical** <u>decision</u> made by leaders at your facility that had ethical implications for staff members and/or patients (e.g., reducing the workforce). Which approaches were used to explain the decision? <u>(Mark all that apply.)</u>

Identify the decision here:

4.10a Staff

☐ No explanation for the decision was provided to the affected staff members.

☐ Leaders provided the affected staff members with a justification for the final decision.

☐ Leaders explained the pros and cons of the options considered to the affected staff members.

☐ Leaders informed the affected staff members about the process used in making the decision including who had input into the decision.

☐ Other (specify):

4.10b Patients and/or Veteran Representatives

☐ No explanation for the decision was provided to patients and/or Veteran representatives.

☐ Leaders provided patients and/or Veteran representatives with a justification for the final decision.

☐ Leaders explained the pros and cons of the options considered to patients and/or Veteran representatives.

☐ Leaders informed patients and/or Veteran representatives about the process used in making the decision, including who had input into the decision.

☐ Other (specify):

☐ Not applicable.

a and b. <u>Resources that describe the standard:</u> Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* p. 35 (Explain your decisions).
<u>Tools to help meet the standard:</u> Quality Check; Ethical Leadership Self-Assessment Tool.

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4.11   Which of the following are included in your facility's approach to educating leaders about ethical leadership? (Mark all that apply.)

☐   This facility does not have a specific approach to educating leaders about ethical leadership.

☐   Some leaders are offered education about ethical leadership.

☐   All leaders are offered education about ethical leadership.

☐   Some leaders are required to receive education about ethical leadership.

☐   All leaders are required education about ethical leadership.

☐   Some leaders are encouraged to use self-assessment as a means to identify areas of ethical leadership for further development.

☐   All leaders are encouraged to use self-assessment as a means to identify areas of ethical leadership for further development.

Resources that describe the standard: Primer—*Ethical Leadership: Fostering an Ethical Environment & Culture,* pp. 23–25 (Prove that ethics matters to you)] IntegratedEthics Toolkit— Roles & Responsibilities of the IntegratedEthics Program Officer and Ethical Leadership Coordinator (Tab 2).

Tools to help meet the standard: Ethical leadership video course; Ethical Leadership Self-Assessment Tool.

4.12   Describe specific examples of how ethical leadership has affected the ethical environment and culture at your facility.

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